

Atty Docket No. 019941-000510US

PTO FAX NO.: 1-571-273-8300

ATTENTION: Examiner Micah Paul Young

Group Art Unit 1615

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**EXAMINER Micah Paul Young**

**CERTIFICATION OF FACSIMILE TRANSMISSION**

I hereby certify that the following documents in re Application of Toyohiro Sawada et al., Application No. 09/834,410, filed April 12, 2001 for TIMED-RELEASE COMPRESSION-COATED SOLID COMPOSITION FOR ORAL ADMINISTRATION are being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Documents Attached

1. Fax Transmittal Sheet (1 pg.)
2. Amendment Transmittal Sheet (1 pg.)
3. Petition for Extension of Time for Three Months (1 pg.)
4. Amendment Under 37 CFR 1.116

Number of pages being transmitted, including this page: 14

Dated: March 3, 2006

  
Patricia A. Balco

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PTO/SB/21 (08-04)

<b>TRANSMITTAL FORM</b>		Application Number	09/834,410
(to be used for all correspondence after initial filing)		Filing Date	April 12, 2001
		First Named Inventor	Sawada, Toyohiro
		Art Unit	1615
		Examiner Name	Micah Paul Young
Total Number of Pages In This Submission		Attorney Docket Number	019941-000510US

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<b>ENCLOSURES (Check all that apply)</b>			
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC	
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<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)	
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information	
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter	
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):	
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer		
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund		
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<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Landscape Table on CD		
<input type="checkbox"/> <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<p style="border: 1px solid black; padding: 2px;">Remarks</p> <p>The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.</p>		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	Joseph R. Snyder		
Date	March 3, 2006	Reg. No.	39,381

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